HAWAII EMPLOYER-UNION HEALTH BENEFITS TRUST FUND FOR ACTIVE EMPLOYEES FORMERLY UNDER THE HSTA VEBA BU 05, 45

EMPLOYER/EMPLOYEE CONTRIBUTIONS EFFECTIVE AUGUST 1, 2011 THROUGH DECEMBER 31, 2011

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Benefit Plan	Type of Enrollment	Semi-Monthly Employee Contribution	Monthly Employee Contribution	Monthly Employer Contribution	Total Contribution Required
MEDICAL PLANS					
HMSA - 90/10	Self	\$103.97	\$207.94	\$207.94	\$415.88
Medical, Drug, RSN Chiropractic,	Two-Party	\$251.07	\$502.14	\$502.14	\$1,004.28
VSP Vision	Family	\$320.41	\$640.80	\$640.82	\$1,281.62
HMSA - 80/20	Self	\$77.63	\$155.26	\$155.26	\$310.52
Medical, Drug, RSN Chiropractic,	Two-Party	\$187.15	\$374.28	\$374.30	\$748.58
VSP Vision	Family	\$238.88	\$477.76	\$477.76	\$955.52
Kaiser Comprehensive	Self	\$92.82	\$185.62	\$185.64	\$371.26
Medical, Drug, RSN Chiropractic,	Two-Party	\$224.26	\$448.50	\$448.52	\$897.02
VSP Vision	Family	\$286.29	\$572.56	\$572.58	\$1,145.14
HMSA Supplemental	Self	\$70.49	\$140.96	\$140.98	\$281.94
Supplemental Medical, Drug, Vision	Two-Party	\$170.08	\$340.18	\$340.16	\$680.34
RSN Chiropractic	Family	\$217.13	\$434.26	\$434.26	\$868.52
DENTAL PLAN					
	Self	\$8.07	\$16.16	\$16.14	\$32.30
HDS Dental	Two-Party	\$16.15	\$32.32	\$32.30	\$64.62
	Family	\$26.58	\$53.18	\$53.16	\$106.34
HDS Supplemental Dental	Self	\$4.28	\$8.58	\$8.56	\$17.14
	Two-Party	\$8.58	\$17.18	\$17.16	\$34.34
	Family	\$12.86	\$25.74	\$25.72	\$51.46
VISION PLAN					
VSP Vision	Self	\$1.51	\$3.02	\$3.02	\$6.04
	Two-Party	\$2.79	\$5.60	\$5.58	\$11.18
	Family	\$3.66	\$7.30	\$7.32	\$14.62
LIFE INSURANCE					
Standard Life Insurance	Employee	\$2.08	\$0.00	\$4.16	\$4.16
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